## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

06/06/2008

7590

PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.

6250 CENTER HILL AVENUE

CINCINNATI, OH 45224

THE PROCTER & GAMBLE COMPANY INTELLECTUAL PROPERTY DIVISION - WEST BLDG. WINTON HILL BUSINESS CENTER - BOX 412

27752

P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

CORA

lune 20

Can a way

Certificate of Mailing or Transmission I hereby certify that this Feeds | Transmitting to | Transmission |
I hereby certify that this Feeds | Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (\$71) 273-2885, on the date indicated below.

WRALL

2008

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

(Depositor's name)

(Signature)

(Date

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "EDDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional apaper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ITORNEY DOCKET NO.	CONFIRMATION NO.
10/719,755	11/21/2003	An	drea Demetrius Bowens-Jones		9447	3138
TITLE OF INVENTION	: ANTIPERSPIRANT N	METHODS AND COMPO	OSITIONS			
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FE	EE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	09/08/2008
EXAMINER		ART UNIT	CLASS-SUBCLASS			
CLAYTOR, DE	IRDRE RENEE	1617	424-065000	,		
Change of corresponder     CFR 1.363).	ence address or indicatio	n of "Fee Address" (37	(I) the names of up to 3 registered pa		ANDIZ	W J HAGERY
Change of corresp	ondence address (or Cha 3/122) attached.	nge of Correspondence				
			(2) the name of a singl	e firm (having as a mo	a member a 2 BK (A)	M. BOLAM
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number Is required.			registered attorney or a 2 registered patent atto listed, no name will be	meys or agents. If no i	no name is 3 TARA	M. ROSNELL
3. ASSIGNEE NAME A	ND RESIDENCE DATA	TO BE PRINTED ON	THE PATENT (print or type	ic)	www	
PLEASE NOTE: Uni	ess an assignee is ident	ified below, no assignee	data will appear on the pa	atent. If an assignee i	is identified below, the de	cument has been filed for
(A) NAME OF ASSI		netion of this form is NO	(B) RESIDENCE: (CITY			
THE DOOR	TEP ADDGA	UBLE COMPAN		CINCINFATI	1410	
			,			_
Please check the appropr	iate assignee category or	categories (will not be pr	inted on the patent):	Individual A Corpo	ration or other private gro	up entity Government
4a. The following fee(s)	are submitted:	41	o. Payment of Fec(s): (Plea	se first reapply any p	reviously pald issue fee s	hown above)
Issue Fee			A check is enclosed.			
Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.			
Advance Order - # of Copies			The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 16 2480 (enclose an extra copy of this form).			
5. Change in Entity Stat			_			
	s SMALL ENTITY state				ENTITY status. See 37 CF	
NOTE: The Issue Fee and interest as shown by the r	d Publication Fee (if requeecords of the United Sta	aired) will not be accepte tes Patent and Trademark	d from anyone other than the Office.	e applicant; a register	ed attorney or agent; or the	assignee or other party in
	(11	W 1 - 1	$\bigcirc$	- ///	1.0	
Authorized Signature	1	11/	<del></del>	Date 6/20/	'68 44. 141	
	: Andrew J.	7 7				
This collection of informa	ation is required by 37 C	FR 1.311. The informatic U.S.C. 122 and 37 CFR	on is required to obtain or not all 1.14. This collection is esting depending upon the individual of the chief Information Office COMPLETED FORMS TO	tain a benefit by the p	ublic which is to file (and	by the USPTO to process)
submitting the completed	application form to the	USPTO. Time will vary	depending upon the indiv	dual case. Any comm	ents on the amount of tim	e you require to complete
Box 1450, Alexandria, V Alexandria, Virginia 223	irginia 22313-1450. DO 13-1450.	NOT SEND FEES OR	COMPLETED FORMS TO	THIS ADDRESS. SE	END TO: Commissioner fo	or Patents, P.O. Box 1450,

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

OMB 0651-0033